

June 28, 2012

Marlene H. Dortch Office of the Secretary Federal Communications Commission 445 12<sup>th</sup> Street SW Washington, D.C. 20554

RE:

WC Docket No. 10-90, In the Matter of Connect America Fund; Annual Reporting Requirements for High-Cost Recipients, 47 CFR §54.313(a)(2)-(6) and (h)

Dear Ms. Dortch:

Enclosed please find the Eligible Telecommunications Carrier (ETC) annual report and certifications for LaHarpe Telephone Company, Study Area Code 411791. This information is being provided pursuant to 47 CFR §54.313(a)(2)-(6) for 2012, covering 2011 calendar year information.

Also enclosed please find LaHarpe Telephone Company Local Rate Floor data as required by 47 CFR §54.313(h), along with the necessary certification signed by a company officer.

This information is being provided to the Administrator and the Kansas Corporation Commission pursuant to 47 CFR §54.313(i).

Please contact the undersigned if there are any questions regarding the enclosed information.

Sincerely,

**Rob Strait** 

Authorized Representative for LaHarpe Telephone Company

Enclosure

cc:

Universal Service Administrative Company

File Clerk Kansas Corporation Commission 1500 SW Arrowhead Road Topeka, KS 66604

## Annual Reporting Requirements pursuant to § 54.313(a)(2)-(6)

WC Docket No. 10-90

§ 54.313	(a)(2) – Outage reporting
	My company was not required to collect this information in 2011.
<u>X</u>	My company collected this information pursuant to state utility commission requirement A copy of the report is attached.
§ 54.313	(a)(3) – Unfulfilled service requests
<u>X</u>	My company was not required to collect this information in 2011.
	My company collected this information pursuant to state utility commission requirement. A copy of the report is attached.
§ 54.313	(a)(4) – Customer complaints per 1000 connections
	My company was not required to collect this information in 2011.
<u>X</u>	My company collected this information pursuant to state utility commission requirement. A copy of the report is attached.

§ 54.313(a)(5) - Service quality standards and consumer protection rules

I certify that the reporting carrier is in compliance with applicable service quality standards and consumer protection rules.

§ 54.313(a)(6) - Ability to function in emergency situations

I certify that the reporting carrier can function in emergency situations as set forth in 47 CFR §54.202(a)(2). Specifically, the reporting carrier has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.

I am authorized to make this certification on behalf of the company named above and, to the best of my knowledge the information reported on this form is accurate. This certification is for the study area(s) listed below. (Please enter your Company Name, State and Study Area Code)

Company Name	State	Study Area Code	
LaHarpe Telephone Company	Kansas	411791	

(If necessary, attach a separate list of additional study areas and check this box.)

Signed,
Tarry Du, J.
[Signature of Corporate Officer
Harry Lee, Jr.
[Printed Name of Corporate Officer]
President
[Title of Corporate Officer]

Carrier's Name LaHarpe Telephone Company Carrier's Address 109 W. 6th St., LaHarpe, KS 66751 Carrier's Telephone Number (620) 496-2291 6/20/12

Date:

2. All ETCs must provide detailed information on any outage lasting at least 30 minutes for any facilities that an ETC owns, operates, leases, or otherwise utilizes that potentially

affect at least 10% of the end users in a service area, or that could affect 911.

Date of	Time of	Description of the Outage and	Particular services	Geographic	Steps Taken to Prevent Future Recurrences	Number of Customers
Outage	Outage	Resolution	affected	Areas Affected	Future Recurrences	Affected
				:		
			-			
		,				
None						

(If necessary, please provide additional pages.)

3. Please provide the number of complaints per 1,000 connections (fixed or mobile). A complaint is any non-duplicative verbal or written complaint received by the company, FCC, and/or KCC. None not attributable to customer owner wiring or CPE.

## Rate Floor Data

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Block 1	- Contact Inform	nation				
ROW#		DATA ELEMENT		FORMAT OF REQUESTED DATA		RESPONSE
1	Carrier Study Area Code			6 numeric digits		411791
2	Carrier Study Area Name			alpha characters	LaHarpe Telephone	e Company
3	Service Provider Identification Number			9 numeric digits	143002297	
4	Residential Local Service Charge Effective Date			mm/dd/yyyy	1/1/2012	
5	Contact Name			alpha characters	Harry Lee, Jr.	
6	Contact Telephone	Number (include ar	ea code)	9 numeric digits	620-496-2291	
7	Sheet number			numeric digit(s)	1	
8	Total Number of Sh	neets		numeric digit(s)	1	
	Column 1 Residential Local	Column 2 State Subscriber	Column 3 State Universal	Column 4 Mandatory	Column 5 Loops	e Counts
	Service Charge	Line Charge	Service Fee	Extended Area Service Charge		
9	\$ 16.25		\$ 1.45		292	
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Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data						
I certify that I am an officer of the reported ; and, to the best of my k	reporting carrier; n nowledge, the info	ny responsibilities include ensuring the a rmation reported on this form is accurate	ccuracy of the a	ctual rate floor data		
Name of Reporting Carrier La Harpe	etephone Com	pany, Inc.				
Signature of authorized officer	Saren 2	w. p.		Dale 06/06/2012		
Printed name of authorized officer Harry	Lee, Jr.	1				
Title or position of authorized officer Pre	sident					
Telephone number of authorized officer. (6	20),496 <u>-</u> 2291,	ext				
Study Area Code of Reporting Carrier	411791	Filing Due Date for this form (mm/dd/yyyy)	7/1/2012			
I certify that our company receives or is as defined) less than \$10.	projected to receive Hi	gh Cost Loop Support or High Cost Model Support is	n 2012 and has no m	onthly residential rates (plus charges		

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING RATE FLOOR DATA ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Rate Floor Data on Beh	alf of Reporting Carrier					
I certify that National Exchange Carrier Association (NECA) the Information reported on behalf of the reporting carrier. Talso certify that I am an officer of the include ensuring the accuracy of the actual rate floor data provided to the authorized agent; an actual rate floor data provided to the authorized agent is accurate.						
t certify that I am authorized to submit the information reported on this form on behalf of the reporting carrier; that I have provided the information reported herein based on data provided by the reporting carrier; and to the best of my knowledge the information reported herein is accurate.						
Name of Authorized Agent National Exchange Carrier Association (NECA)						
Name of Reporting Carrier LaHarpe Telephone Company, Inc.						
Signature of authorized officer Hawk Yeur VV.	<sub>Date</sub> 06/06/2012					
Printed name of authorized officer Harry Lefe, Jr.						
Title or position of authorized officer President						
Telephone number of authorized officer; (620), 496-2291 ext.						
411701 Filing Due Date for this form	7/1/2012					